

**COUNTY OF SAN DIEGO, CALIFORNIA**  
**BOARD OF SUPERVISORS POLICY**

**Subject**

Legislative Policy: Human Immunodeficiency Virus (HIV) Infection/AIDS

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**Purpose**

To establish the Board of Supervisors' legislative policy regarding Human Immunodeficiency Virus (HIV) Infection/Acquired Immune Deficiency Syndrome (AIDS) and to provide guidance to the County's legislative representatives when advocating the County's interests to legislators, other elected officials and policy makers.

**Background**

As of September 30, 2002, a total of 11,413 San Diego residents had been diagnosed and reported with AIDS, and 6,390 of those had died. In addition to the 5,023 San Diego residents still living with AIDS, an estimated 9,000 additional residents are living with HIV infection. Although new therapies have raised hopes for longer life spans and better quality of life for people living with HIV/AIDS, these therapies are not appropriate or effective for all consumers, and they have dramatically increased the already high cost of care and treatment for this disease. Legislative initiatives at state and federal levels can still have a profound influence on the course of the epidemic.

**Policy**

The legislative policy of the Board of Supervisors regarding HIV Infection/AIDS is to:

1. Support legislation that would provide protection against any discrimination based upon HIV status, and support continued availability of anonymous HIV testing.
2. Support legislation that would provide continued funding, including adjustments for caseload and cost-of-care driven budget increases, for direct services such as mental health, case management, primary care, dental and other non acute-hospital based care to persons infected with the HIV.
3. Support legislation that would provide funding for HIV prevention programs and care and treatment services to local jurisdictions, with responsibility and support for locally-controlled needs assessment, planning, and resource allocation.
4. Support legislation that would provide for HIV prevention activities that are justified by professional, peer-reviewed research, provided that such activities are not in conflict with any other established Board policy.
5. Support legislation that would respond to the increasing impact of HIV/AIDS among the young, poor, women, and minorities, including support for culturally appropriate services, while maintaining the level of effort already developed regarding men who have sex with men.
6. Support legislation that would make those disabled by HIV infection eligible for Medi-Cal when they meet financial eligibility requirements, and support an

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- appropriate scope of services and provider reimbursement programs to ensure adequate access to needed services.
7. Support legislation that would provide long-term maintenance of funding for HIV-related medicines and laboratory tests.
  8. Support legislation that would provide full cost recovery for all HIV-related services provided at the local level.
  9. Support legislation that would continue authority and funding for the Health Insurance Premium Payment (HIPP) Program.
  10. Support legislation that would expand counseling and education, case management, health care, and related efforts aimed at both jail inmates and jail personnel, and encourage voluntary testing.
  11. Oppose legislation that would implement HIV reporting policies in cases where evaluations and research findings demonstrate adverse costs, inefficiencies, or detrimental impacts on funding or public health outcomes.

**Responsible Departments**

1. Health and Human Services Agency
2. Office of Strategy and Intergovernmental Affairs

**Sunset Date**

This policy will be reviewed for continuance by 12/31/07.

**References**

Board Action 9/15/87 (96)  
Board Action 1/29/91 (78)  
Board Action 8/4/97 (50)  
Board Action 4/13/99 (42A)  
Board Action 1/13/04 (13)